
Accreditation Report – Main Gate Counseling Service

Date of Review: February 25, 2021

Overall Score: 98.7%

REVIEW PROCESS:

Main Gate Counseling Service was reviewed by The Department of Social Services, Office of Licensing and Accreditation for adherence to the Administrative Rules of South Dakota (ARSD) on February 25, 2021. This report contains the following:

- Agency Summary
- Interview Results
- Stakeholder Results
- Administrative and Client Case Record Findings
- Areas of Strengths
- Areas of Recommendations
- Areas Requiring a Plan of Correction
- Prior Areas Addressed in Previous Review
- Accreditation Results

The accreditation results are derived from an administrative score which includes the scoring of policies and procedures, personnel files, the client case record scores, and an overall accumulative score. The level of accreditation status is based on the overall accumulative score.

AGENCY SUMMARY:

Main Gate Counseling Service is a non-profit Substance Use Disorder agency located in Winner S.D. The agency is seeking to renew accreditation for outpatient substance use disorder services (SUD).

The current director, Cathy Mayes, has been with Main Gate Counseling Service since 2011. Main Gate has a good relationship with the community. Main Gate is in the same building as some of the community partners.

Ms. Mayes is Main Gate's only counselor. Ms. Mayes states no one is ever turned away for inability to pay.

INTERVIEW RESULTS:

Description: The Department of Social Services, Office of Licensing and Accreditation completes confidential interviews with consenting clients and staff of the agency as part of the accreditation process. The interviews are not a scored component of the accreditation review however the information obtained in the interviews is used for quality improvement of the agency.

An interview was completed with a current client. No concerns were noted. The client stated she has had a great experience and that everyone should have a Cathy in their life.

STAKEHOLDER SURVEY:

Description: Stakeholder Survey data is collected once a year for all accredited mental health and substance use disorder agencies. As part of the survey process, accredited agencies are asked to share the survey with at least three stakeholders in their community. In addition, feedback is gathered from the Department of Corrections (DOC), Unified Judicial System (UJS), and Child Protection Services (CPS) regarding the accredited agencies. The surveys are not a scored component of the accreditation review. However, the information obtained in the survey results is used for quality improvement of the agency.

Stakeholder results were sent out and collected over the past three years. Main Gate had a total of 12 responses. No concerns were indicated.

AREAS OF STRENGTHS:

Description: The following areas were identified as areas the agency demonstrated substantial competency to administrative rules.

1. According to 67:61:07:06. An addiction counselor or counselor trainee shall develop an individualized treatment plan based upon the integrated assessment for each client admitted to an outpatient treatment program, intensive outpatient treatment program, day treatment program, clinically-managed low-intensity residential treatment program, or medically-monitored intensive inpatient treatment program. Evidence of the client's meaningful involvement in formulating the plan shall be documented in the file.

All treatment plans were completed on time with the necessary requirements.

2. According to 67:61:07:08. All programs, except prevention programs, shall record and maintain a minimum of one progress note weekly, when services are provided. Progress notes are included in the client's file and substantiate all services provided. Individual progress notes must document counseling sessions with the client, summarize significant events occurring, and reflect goals and problems relevant during the session and any progress in achieving those goals and addressing the problems. Progress notes must include attention to any co-occurring disorder as they relate to the client's substance use disorder.

All progress notes were completed and were very detailed. The progress notes and continued service criteria (67:61:07:07) were in the same document. All requirements for progress notes and continued service criteria were met.

3. According to 67:61:07:10. An addiction counselor or counselor trainee shall complete a transfer or discharge summary for any client within five working days after the client is discharged regardless of the reason for discharge. A transfer or discharge summary of the client's problems, course of treatment, and progress toward planned goals and objectives identified in the treatment plan is maintained in the client case record.

All discharge summaries were completed in a timely manner and with the required information.

AREAS OF RECOMENDATION:

Description: The following area was identified as an area that the agency is recommended to review and ensure that the area is corrected. The area identified met minimum standards which would not require a plan of correction at this time however if it continues to be found on the next accreditation review could become future areas of non-compliance requiring a plan of correction.

1. According to 67:61:03:03. The board of directors of each agency with a board shall meet at least quarterly. Minutes of all board of director meetings shall be kept.

During the pandemic of 2020 the Board of Directors did not meet quarterly. It was advised to continue either in person or virtually.

2. According to 67:61:07:05. An addiction counselor or counselor trainee shall meet with the client and the client's family if appropriate, to complete an integrated assessment, within 30 days of intake. The integrated assessment includes both functional and diagnostic components. The assessment shall establish the historical development and dysfunctional nature of the client's alcohol and drug abuse or dependence and shall assess the client's treatment needs. The assessment shall be recorded in the client's case record and includes the following components:

- a) Past or current indications of trauma, domestic violence, or both if applicable

Four out of seven charts were missing this requirement.

AREAS REQUIRED FOR PLANS OF CORRECTION:

Description: The following area will require a plan of correction to address the rule of non-compliance which shall include an updated policy and/or procedure, a time frame for implementation of this procedure, the staff position or title responsible for implementation and the staff position or title responsible for ensuring continued compliance of the rule.

- 1. According to ARSD 67:61:04:01 Each agency shall have a policy and procedure manual to establish compliance with this article and procedures for reviewing and updating the manual.

Main Gate Counseling Service's policy and procedures reference old ARSD 46:05 which were replaced December 5, 2016. The last review it was noted it needed to be updated.

PRIOR AREAS REQUIRING A PLAN OF CORRECTION:

Description: Main Gate Counseling Services was last reviewed by the Department of Social Services, Office of Licensing and Accreditation in March 2018. The 2018 review identified four areas of recommendations and six areas requiring a plan of correction. Main Gate resolved the four prior areas of recommendation and five out of the six prior areas requiring a plan of correction.

ACCREDITATION RESULTS:

Administrative Review Score: 98.2%

Combined Client Chart Review Score: 98.9%

Cumulative Score: 98.7%

X	Three Year Accreditation (90%-100%)
	Two Year Accreditation (70%-89%)
	Probation (69% and below)